Optional Coverages

2011 - 2012 Plan Year

The following monthly premiums are effective October 1, 2011 - September 30, 2012.

Optional Coverage: Active and Retired Members		
Cancer	\$38/month	Individual or Family Coverage
Indemnity	\$38/month	Individual or Family Coverage
Dental	\$38/month	Individual Coverage
	\$45/month	Family Coverage
Vision	\$38/month	Individual or Family Coverage

If a member or dependent is under age 65 and eligible for Medicare coverage due to a disability, the PEEHIP office **must receive** a copy of the Medicare card before the premiums can be reduced. However, PEEHIP will pay secondary to Medicare once our office becomes aware of your Medicare eligibility regardless of whether our office has received your Medicare card. Medicare eligible members and dependents should have Medicare Part A and Part B to have adequate coverage with PEEHIP.

Medicare rules require a Medicare-eligible, active PEEHIP member who is covered on their spouse's PEEHIP retired contract to have Medicare as the primary payer on the active PEEHIP member. Therefore, the active Medicare-eligible member will need Medicare Part A **and** Part B coverage.

If the active member who is insured as a dependent on a retired contract does not want Medicare as his primary payer and does not want to enroll in Medicare Part B until retirement, the active member has the option of enrolling in a separate PEEHIP contract as an active member. However, when the active Medicare-eligible member retires, he or she will need to enroll in Medicare Part B. The effective date of Medicare Part B must be the date of retirement to avoid a lapse in coverage.